

SENATE BILL 2797  
By Black

AN ACT to amend Tennessee Code Annotated, Title 56  
and Title 63, relative to access to services  
provided by ophthalmologists.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 56, Chapter 7, Part 23, is amended by  
adding the following as a new section:

56-7-2366.

(a) No health insurance issuer and no managed health insurance issuer may:

(1) Deny any licensed ophthalmologist or clinic operated by a licensed  
ophthalmologist the right to participate as a participating provider in any policy, contract,  
or plan on the same terms and conditions as are offered to any other provider of  
ophthalmologic services under the policy, contract, or plan; provided, that nothing herein  
shall prohibit a managed health insurance issuer or health insurance issuer from  
establishing rates or fees that may be higher in non-urban areas, or in specific instances  
where a managed health insurance issuer or health insurance issuer determines it  
necessary to contract with a particular provider in order to meet network adequacy  
standards or patient care needs.

(2) Prevent any person who is a party to or beneficiary of any policy, contract, or  
plan from selecting a licensed ophthalmologist or clinic operated by a licensed  
ophthalmologist of such person's choice to furnish ophthalmologically-related services  
offered under any contract, policy, or plan; provided the licensed ophthalmologist or  
clinic operated by a licensed ophthalmologist is a participating provider under the same

terms and conditions of the contract, policy, or plan as those offered any other provider of such services;

(b) The term "managed health insurance issuer" has the same meaning as such term is defined in § 56-32-228(a).

(c) Each health insurance issuer or managed health insurance issuer shall apply the same coinsurance, co-payment, deductible, and quantity limit factors within the same employee group and other plan-sponsored group to all services by any licensed ophthalmologist or clinic operated by a licensed ophthalmologist; provided, that such providers comply with the same terms and conditions. Nothing in this section shall be construed to prohibit an employer or other plan-sponsored group from offering multiple options or choices of health insurance benefit plans including, but not limited to, cafeteria benefit plans.

SECTION 2. This act shall take effect July 1, 2006, the public welfare requiring it.